



09-21-00

Atty. Dkt. No. 46983/101



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: A. Maxwell Eliscu

Title: SYSTEM FOR AND METHOD OF  
PROVIDING FINANCIAL AND  
TRANSACTION MANAGEMENT  
SERVICES OVER A NETWORK

Appl. No.: Unknown

Filing Date: Unknown

Examiner: Unknown

Art Unit: Unknown

<b>CERTIFICATE OF EXPRESS MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.	
EL564116915US	9/20/2000
(Express Mail Label Number)	(Date of Deposit)
CHRIS ESCAVILLE	
(Printed Name)	
Chris Escaville	
(Signature)	

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Assistant Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

The application claims the benefits of U.S. Provisional Application No. 60/230,856, filed 09/07/2000. Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

A. Maxwell Eliscu

Enclosed are:

- [ X ] Specification, Claim(s), and Abstract (87 pages).
- [ X ] Informal drawings (47 sheets, Figures 1-38).
- [ X ] Declaration and Power of Attorney (3 pages).
- [ X ] Assignment of the invention to LSQ II, LLC.
- [ X ] Assignment Recordation Cover Sheet.
- [ X ] Check in the amount of \$40.00 for Assignment recordation.
- [ X ] Small Entity statement.
- [ ] Information Disclosure Statement.

☐ Form PTO-1449 with copies of \_\_\_ listed reference(s).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$690.00	\$690.00
Total Claims:	71	- 20	= 51	x \$18.00	= \$918.00
Independents:	11	- 3	= 8	x \$78.00	= \$624.00
If any Multiple Dependent Claim(s) present:			+	\$260.00	= \$0.00
				SUBTOTAL:	= \$2232.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above):					= \$1,116.00
				TOTAL FILING FEE:	= \$1,116.00

- ☒ A check in the amount of \$1,116.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Sept. 20, 2000

By 

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APPLICANT OR PATENTEE: A. Maxwell Eliscu Docket No.: 46983/101  
SERIAL OR PATENT NO.: \_\_\_\_\_  
FILED OR ISSUED: \_\_\_\_\_  
FOR: SYSTEM FOR AND METHOD OF PROVIDING FINANCIAL AND TRANSACTION  
MANAGEMENT SERVICES OVER A NETWORK

**STATEMENT CLAIMING  
SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(c))  
SMALL BUSINESS CONCERN**

I hereby declare that I am:

- ☐ the owner of the small business concern identified below.
- ☒ an official of the small business concern empowered to act on behalf of the concern identified below.

NAME OF CONCERN: LSQ II, LLC

ADDRESS OF CONCERN: 1 South Orange Avenue, Suite 405, Orlando, Florida 32801

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.8(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled:

SYSTEM FOR AND METHOD OF PROVIDING FINANCIAL AND TRANSACTION  
MANAGEMENT SERVICES OVER A NETWORK

by inventor(s) A. Maxwell Eliscu  
described in:

- ☒ the specification filed herewith
- ☐ application serial no. \_\_\_\_\_, filed \_\_\_\_\_
- ☐ patent no. \_\_\_\_\_, issued \_\_\_\_\_

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who would not

qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9( ). NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein are of my own knowledge, are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: A. Maxwell Elise

TITLE OF PERSON OTHER THAN OWNER: Manager

SIGNATURE [Signature] DATE 9-7-00